## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F02000005233

1. Entity Name

MARCH PLASMA SYSTEMS, INC.



FILED Apr 01, 2008 08:00 Al Secretary of State

Principal Place of Business

2470-A BATES AVE CONCORD, CA 94520 Mailing Address

2762 LOKER AVE W ARLSBAD, CA 92010



DO NOT WRITE IN THIS SPACE

03242008 No Chg-P CR2E034 (11/05)

4. FEI Number
68-0018641

S. Certificate of Status Desired

4. FEI Number
Not Applied For
Not Applicable

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 DO NOT WRITE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registared agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

- U00000876959 -/11/09-20027-018-150-00

OFFICERS AND DIRECTORS 10. TITLE DUNN, ROBERT A NAME STREET ADDRESS 28601 CLEMENS ROAD CITY-ST-ZIP WESTLAKE, OH 44145 TITLE CAMPBELL, EDWARD P NAME STREET ADDRESS 28601 CLEMENS ROAD CITY-ST-ZIP WESTLAKE, OH 44145 TITLE VEILLETTE, ROBERT E STREET ADDRESS 28601 CLEMENS ROAD WESTLAKE, OH 44145 CITY-ST-ZIP TITLE CUSHING, RAYMOND L NAME STREET ADDRESS 28601 CLEMENS ROAD CITY-ST-7IP WESTLAKE, OH 44145 TITLE BIERHUIS, PETER NAME 2470-A BATES AVE STREET ADDRESS CITY-ST-ZIP CONCORD, CA 94520 TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PETER BIERHUIS

3/24/08

925-246-1678

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #